### FORM D

corporation ☐ business trust

Jurisdiction of Incorporation or Organization:

Actual or Estimated Date of Incorporation or Organization:

**UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, UNIFORM LIN

OMB APPROVAL							
OMB Number: 32	35-0076						
Expires April 30, 2							
Estimated average burden							
hours per response:	16.00						

SEC USE ONLY

Serial

UNIFORM LIMITED OFFERING EXEMPTION	DATE RECEIVED
Name of Offering ( check if this is an amendment and name has changed, and indicate chan LSV: Non-US Equity LLC (f/k/a Goldman Sachs GMS International Equity Advisers 1 (	LSV), L.L.C.): Limited Liability Company Units
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506	
Type of Filing: ☐ New Filing ☑ Amendment	Mail Processing
A. BASIC IDENTIFICATION DA	ra Section
Enter the information requested about the issuer	APR 1 G END
Name of Issuer ( check if this is an amendment and name has changed, and indicate chan LSV: Non-US Equity LLC (f/k/a Goldman Sachs GMS International Equity Adviser:	(80.)
Address of Executive Offices (Number and Street, City, State Zip Code)  One New York Plaza, New York, New York 10004	Telephone Number (Washing FRE Code) (212) 902-1000
Address of Principal Business Operations (if different from Executive Offices)  (Number and Street, City, State and Zip Code  PROCESSE	
Brief Description of Business To operate as a private investment fund.  APR 2 4 2008	A STATE OF THE STA
Type of Business Organization  Corporation  Dimited partnership, already formed	O8046604  ✓ other (please specify):

Limited Liability Company

□ Estimated

DE

☑ Actual

Prefix

#### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

Month

0

7

(Enter two-letter U.S. Postal Service abbreviation for

State: CN for Canada; FN for other foreign jurisdiction )

Year

0 5

☐ limited partnership, to be formed

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA									
2. Enter the information requested for the following:									
* Each promoter of the issuer, if the issuer has been organized within the past five years;									
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
* Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member)									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(cs) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or  * of the Issuer's Managing Member Managing Partner									
Full Name (Last name first, if individual)									
Asali, Omar M.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or  * of the Issuer's Managing Member Managing Partner									
Full Name (Last name first, if individual)									
Barbetta, Jennifer									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner									
Full Name (Last name first, if individual)									
Gottlieb, Jason									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner									
Full Name (Last name first, if individual)									
Ort, Peter									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer* ☐ Director ☐ General and/or * of the Issuer's Managing Member Managing Partner									
Full Name (Last name first, if individual)									
Ross, Hugh M.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
One New York Plaza, New York, New York 10004									
Check Box(es) that Apply:									
Full Name (Last name first, if individual)									

Business or Residence Address (Number and Street, City, State, Zip Code)

				B, INI	FORMAT	ION ABO	UT OFFI	ERING_				
1. Has the	e issuer sold	or does th	ie issuer inte	end to sell.	to non-accre	edited inves	tors in this	offering?			Yes □	No ☑
	, 135 <b>45</b> 1 doile	, 0. 0000			in Appendi							
*The Issu	s the minim er's Mana nines is acce	ging Memi	ent that wil	l be accepte its sole d	ed from any iscretion a	individual? ccept subse	cription an	ounts in v	vhatever a	mount it	\$	*
											Yes	No
			ownership								Ø	
commit If a per or state	ssion or sin rson to be li es, list the n	nilar remuno sted is an a ame of the	eted for each eration for s ssociated pe broker or de et forth the i	solicitation or age caler. If mo	of purchase int of a brok ore than five	rs in connecter or dealer e (5) person	ction with sa registered v s to be lister	ales of secur with the SE	rities in the C and/or wi	offering. ith a state		
Full Name	(Last name	first, if ind	ividual)	-								
Goldman,	Sachs & C	0.*										
			sold throu	gh Goldma	n, Sachs &	Co., no con	nmissions v	will be paid	l, directly o	or indirectly	, for solicit	ing any
Business o	in any juri r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)	<u> </u>	·•		<del> </del>	_	
			w York 10	004								
Name of A	ssociated B	roker or De	ealer									
			s Solicited lividual Stat								🗹 A	ll States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA] [PR]
[RI] Full Name	[SC] (Last name	[SD]	[TN] lividual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[FK]
			Number and	Street Cit	. State 7in	Coda)				•		
				i sireei, Cii	y, State, Zip							
Name of A	Associated B	roker or De	ealer 									
			as Solicited dividual Stat					.,.,			🗆 Al	l States
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
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T un rame	(Last name	11131, 11 1110	ii viduui)									
Business of	or Residence	Address (	Number and	Street, Cit	y, State, Zip	Code)				-		
Name of A	Associated E	roker or D	ealer		· · · · · · · · · · · · · · · · · · ·							
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$_	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$_	0	\$_	0
	Partnership Interests	\$_	0	\$	0
	Other (Specify): Limited Liability Company Units	\$_	1,577,700,586	\$	1,577,700,586
	Total			\$	1,577,700,586
	Answer also in Appendix, Column 3, if filing under ULOE.				<del>-</del>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		476	\$	1,577,700,586
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			•	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of		Dollar Amount
	Type of offering		Security		Sold
	Rule 505	_	N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504	_	N/A	\$	N/A
	Total		N/A	\$	N/A
ti ti	t.a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		☑	\$	88,833
	Accounting Fees		Ö	\$	0
	Engineering Fees		0	\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total		Ø	\$	88,833

		_					
C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXP	ENS	ES A	AND USE OF P	ROCE	EDS	<u> </u>
b. Enter the difference between the aggregate offering price given in response to Part C  - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."  Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response							1,577,611,753
to Part C - Question 4.b. above.				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees			\$_	0		\$_	0
Purchase of real estate			\$_	0		\$_	0
Purchase, rental or leasing and installation of ma	schinery and equipment		\$_	0	_ 🗆	\$.	0
Construction or leasing of plant buildings and fa	cilities		\$_	0		\$_	0
Acquisition of other businesses (including the this offering that may be used in exchange f another issuer pursuant to a merger)	or the assets or securities of		\$	0		\$	0
Repayment of indebtedness			<b>s</b> -	0		\$	0
Working capital			\$	0	-	\$	0
Other (Specify): Limited Liability Company U			* - \$	_	- <del>-</del>	\$	1,577,611,753
Column Totals			\$ - \$		- <u>-</u>	* - \$	
Column Totals			<b>~</b> _			Ψ.	1,577,011,705
Total Payments Listed (column totals added)							753
	D. FEDERAL SIGNATU	RE					
The issuer has duly caused this notice to be sign following signature constitutes an undertaking by of its staff, the information furnished by the issuer to	the issuer to furnish to the U.S. Se	ecuriti	ies ar	id Exchange Comi	nission,	upo	n written request
Issuer (Print or Type) LSV: Non-US Equity LLC (f/k/a Goldman Sachs GMS International Equity Advisers 1 (LSV), L.L.C.)	Signature Caus tree			Date . April <u>  4</u> , 2008			
Name of Signer (Print or Type)  Caroline Kraus  Title of Signer (Print or Type)  Assistant Secretary of the Issuer's Managing Member							

**END** 

## ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).